

Empathy awakened; The Dispensation of Hugs

It was as small white house in St. Paul, not all that far from Hamline University, where our son Daniel earned his BA. The paint was peeling a little, and the front gutters were sagging. The yard was well kept but very small. The grass was mostly brown, but there were a few patches of green attempting valiantly to stay visible. A few blue flowers sprouted outside by the front steps, but they may have been wild; they looked thirsty, too.

A middle-aged, haggard-looking woman met me at the door. Her hair was unkempt and she wore rumpled work clothes, and in spite of the worry lines that dominated her face, she greeted me fairly cheerfully.

“We’re happy to see you. Our piano is very sad and needs your attention.” She chuckled at the emotional state she attributed to it. “She’s getting played more lately, I’m glad to say, that’s how we can tell.” She led me past the hallway loaded with coats and boots from the winter, months earlier, and a huge scattering of toys of various sizes and conditions. Some appeared to be used long past their prime, but still appreciated.

I was led into the living room—the coffee table there was covered with envelopes, papers in piles and plastic drinking cups that had been there for days. We turned left into the dining room where even more chaos appeared on the old oak dinner table. One small spot had been cleared away for a school spelling book and a homework project. Along the wall opposite the windows stood a brave but battered spinet piano, just about waist high. As the woman helped me to clear off the beginner’s piano books, she explained to me that a few of the keys were not working very well, and could I fix them?

After more shuffling of items off the piano (was that a petrified apple core?) including many school drawings and fairly inventive kid’s creations -- one was a wildly distended little house made of legos – I finally was able to open the top and remove the music rack to get a good look inside of the piano, thus enabling my exam to learn what could be wrong. The first thing I noticed was a little pile of dusty action figures and tiny toys toward one end of the keyboard, stuff that had fallen in or been dropped into the piano over the last couple of years. On many pianos, especially taller uprights, it’s very easy for objects to fall inside behind the music rack, round things can roll in and items that are placed near the gap at either end of the wood front can accidentally get shoved into the dark area behind, where they will lurk until the piano tuner comes to take everything apart and retrieve them. Of course, it would be pretty easy for the owners themselves to open up that cavity inside, atop the bare wood part of the keys, if they felt daring enough, but just about everyone gets nervous about taking any risks with regions of the piano not intended for general use. On a spinet, however, there usually is no gap for things to fall through, so this suggests that these toys were dumped into the piano slyly, with a quick, slight lift of the piano top. Hiding something from someone else? Protecting that crazy ball from being bounced by someone who just shouldn’t be touching it? Maybe, but having not thought through how to get stuff out again, the kids before long realize the game parts and mini super-heroes are trapped inside, where they are soon forgotten and remain in dormancy until I arrive to rescue them.

In a surprising number of pianos, picking out the swallowed items (sheet music and lesson pages are frequent culprits) often fixes any problems with the sluggish keys. One time I was working on a beautiful old upright at a retired professor's home, someone who often played ragtime/bluegrass piano and very inventive, intelligent improvised clarinet music with friends. They had even produced some very professional-sounding self-made CDs. His wife was also quite an accomplished pianist, so the piano must have been played nearly every day. Several keys on this piano were immobilized and when I took off the music desk to investigate inside, I was amazed to see an enormous collection of over thirty pens and pencils, all of which had rolled off the back edge of the music desk and into the pit. It appeared to me that these pencils and pens had, in some cases, been hiding in there for eons, judging from the layers of dust they carried. The prof happened to be in the same room sorting an old box of music, and I called him over to have a look before I started collecting everything. He too was amazed by the sheer quantity of them, and had to laugh and shake his head. "That piano's not been taken apart for as long as I can remember. My wife uses those writing things all the time for scribbling notes in the music!" We talked about how that many missing writing implements should have been noticed eventually, but she had never said anything to him about missing pencils. She must have had a limitless supply somewhere, and was afraid to investigate where the originals had disappeared. Sure enough, fishing out the obstructing sticks of wood and plastic did in fact set loose the stuck keys again, except for one note that had a broken whippen inside the action, a fairly common repair.

Inside the woman's house in St. Paul, within the battered brown spinet, removing the stray junk helped some, but I soon found myself taking care of several other little repairs and adjustments that eventually made the keys all operational again, to the delight of the owner who had been hovering nearby like the concerned mom she was. Also peeking around the corner from the next room were three small, shy faces, curious, but not wanting to bother me in my work. I invited them in to see the inside of the piano, and I was able to demonstrate to them how the pushing of any key sets in motion all those fascinating levers and gismos that eventually caused the hammer to shoot forward and strike the strings. I doubt that any of them had ever seen the inside of a piano before, and since this piano had become so important to them, it was exceedingly interesting for them to see it come back to life, to function again after having so much be wrong with it for so long. The sound it produced turned from horrible to fairly normal after my hour's worth of ministrations. Once done, I played a couple of recognizable little tunes for the rapt audience, and it appeared to me they were all in heaven. They comprised a dark-haired seven-year-old girl, the most serious and responsible of the trio, a goofy five-year-old boy, wild to try the piano himself, and an exceedingly charming three-year-old girl who couldn't stop grinning and jumping up and down.

Then I let them at it, and all three lined up at the keys to see all those pieces of wood and felt swing into action, generating excitement, each child producing his/her individual sounds they could claim as their own. They cooperated surprisingly well as all claimed their own territories to focus on and relish. It sounded like a very joyous

cacophony for a close-knit family to share. Soon I had to wade in to carefully shunt them aside so I could put the music rack back in place again.

As I was packing up my tools, it was spontaneously decided that I deserved a hug of gratitude from each of them, and they lined up sweetly to take turns giving me heart-felt squeezes, beginning with the youngest. I was very happy to oblige them all. My visit there had been rewarding to me too. I gather that I had supplied something useful and helpful when they needed it the most.

Having decided early on that the extra repairs were free today, I picked up my standard-rate check, and as I was leaving, the kids were all at the piano again, flailing away happily. I was glad to see the piano lesson books in residence, and I suspect they all were eager piano students after that.

The woman saw me to the door, smiling about the hugs. By way of explanation, she confided in me, "It's been quite a while since there's been a man in this house."

I'm pleased I could provide them a tuned and working piano, and some comfort as well. There may have been a longing deep inside each of them that I helped to dispel temporarily. I have always wondered why the father of those wonderful children was absent. Had he left for some mysterious reason? Had he been taken from them before his time? I resisted the urge to ask, and I never have learned the answer.

I hope for the best for them all, even now. I wouldn't be surprised if those young ones, now thirty years older, are all parents themselves, spreading their excitement and love of music to their own special offspring.

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When I arrive at a piano tuning job, I often find myself in the middle of a life situation I had not anticipated. As I rang the bell in mid-afternoon at a small middle-class dwelling in a western suburb, I noticed immediately that the young woman who greeted me had something amiss with her upper lip. I must have showed my surprise and worry involuntarily, and she hastened to explain that she had just arrived back from a visit to a specialist that morning. She had some stitches in place and a mean cut in the middle of her lip. "I have a cleft pallet that needs some attention sometimes. Each procedure takes me closer to the final one." I offered her some typical commiseration and wished her best of luck.

I made my way to the room with the piano and got to work, while she puttered in the kitchen. She seemed to be acting a little more stiff than normal. She was preparing a meal at 3:30 in the afternoon. As she worked, it became clear that she was trying to cope with some severe pain. Perhaps the local anesthetic was wearing off from her doctor visit. She shakily turned to her purse for a couple of additional pain pills. A half hour later, as I concentrated on my task at hand, she had finished (long before suppertime) the evening meal, which involved good aromas that filled the home. It featured ground beef, I'm pretty sure. As time went on she became more upset. Her husband was probably not

expected home for at least another hour. I tuned the upper range on the piano with the great smells surrounding me. In the distance, at the other end of the kitchen, I heard the woman punching numbers on her phone. Soon, she seemed to be on the line with the nurse at the doctor's office, almost in tears. 'I need something more for the pain! Can I get something stronger?' The nurse at the other end apparently remembered the woman, and told her that she would ask the doctor if there was anything that could be done. After a long pause, with the woman pacing the kitchen floor in unsettled fashion, the nurse returned to the phone apparently with good news. I heard snippets of the woman's responses: 'Ready at the drug store in a half hour? Wonderful. My husband will stop by on the way home.'

I finished the tuning, put everything back together and packed up my tools. I felt terrible for her and wished I could ease things. I asked if there was anything I could do, and she said, "You've helped already. I like hearing you play the piano. It was a good distraction for me." I answered, "Now you can play your own music. Healthy therapy." I wished her the best, and as I headed out the door, she was able to produce a wan smile and tell me, "I can't wait to sit down to it."

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One spring, in a southern suburb, I was called in to work on a piano in a special care halfway house. This was a temporary home for five or six elderly women who had various problems and requirements, but were deemed well enough not to need complete nursing home care. A full-time nurse was always present in the home—a rotation of three eight-hour shifts. The nurse on duty was responsible for all of the residents, cooking, passing the time with them, helping them with whatever they needed. A couple of patients had injuries that needed to be tended periodically.

Entertainment was also provided by the nurse (singing together maybe?) or whoever stopped by the piano for them. All of the patients seemed resigned to their fate there, hoping that someday they could be back home--when they were ready, which probably seemed a long way off. As I tuned the spinet piano in the home's living room, I witnessed a tableau that upset me a bit. I found myself empathetic with both participants. As the nurse was in one of the bedrooms taking care of someone else, two women were in the living room with me, basically ignoring what I was doing. One elderly lady was lying on the couch with her arm across her eyes and moaning very quietly. She was in no way compromised (as far as I could notice) except for a strange cast on her calf that seemed to be awkward and cumbersome to deal with. She was clearly very unhappy. Wandering in and out of the room unsteadily was another woman whom I gathered must be quite compromised mentally. She moved slowly with an odd smile and did not seem to understand much about her surroundings. Blessed (or cursed?) with an innate tidy-ness instinct, she simpered a little as she moved randomly from place to place adjusting a couch cushion, straightening papers and knick-knacks that did not need any improvement. Occasionally she would stop by the woman on the couch and notice her as if for the first time. She never said anything to anyone, but would try to interact in a way that fit in, as far as she understood. Glancing at the reclined woman, she would carefully

pat her on the head and smooth her hair before moving to some other spot in the room that her eyes lit upon, like a book or a magazine, which she would examine uncomprehendingly before arranging it correctly. If she looked at a magazine cover for more than a second, it may have been that she recognized whoever was pictured on it. During my hour there, I didn't think anyone paid much notice what I was doing, except once someone in a distant bedroom called out "Play me *Shine on Harvest Moon!*" That's a song that has some mildly weird chord changes, so I didn't want to attempt it.

On the next traversal of the room, making her rounds, the confused woman again lightly petted the head of the one on the couch. Irritated, that woman swatted her hand away, and barked, "Stop it! You're a pain in the ass!" The other woman did not notice what had happened and had no reaction to being scolded. She tottered on to the bookshelf in the corner by the bay window to make sure all the book spines aligned properly. I empathized with them each of them in different ways. The lady with the broken leg was in a situation that she hated but had to put up with for a while; the woman with the muddled awareness was probably a wonderful person back in her regular life twenty years ago, but was no longer all there. Either one of them could have been me, had not fate smiled on me more favorably.

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About twenty years ago, I was the regular piano tuner for a senior's apartment complex, and for the whole unit in the next-door nursing home devoted to oldsters who were memory-challenged. There was a great deal of confusion and chaos within that locked series of common rooms and individual living quarters. Devoted and capable nurses and staff people were carefully watching all their wards with kindness and concern. The caretakers appeared to be well aware of the types of dangers that these patients could get themselves into without realizing it. Every resident was deeply submerged in a quandary of misunderstanding and fantasy. They weren't too unhappy, just constantly bewildered, and wishing things were 'normal' again, like what snippets of their lives they could remember. They all seemed to get along with each other, sometimes sitting in twos and threes at tables and independently saying things that made very little sense. Sometimes they would eat their meals together in the lunchroom, often with assistance from devoted family members or spouses armed with a spoon in one hand and a large napkin in the other for the face-wiping.

One woman who seemed to be used to a certain amount of command and authority questioned why I was there tuning her piano. "Did Eric arrange this? Didn't he know I have plans, people coming over soon?" "Is Eric your son?" I asked. "Yes! Why would he set this up for now?" I answered reasonably, "Eric wanted this tuning to be done *before* they came." She looked very dubious about this, but accepted it. "But this is *my* piano. He shouldn't be doing this." I smiled and tried to reassure her that everything would be done in time. My role was to make the piano sound beautiful, so that music could provide its natural therapy for all those folks who just wanted to return to the way they were, back when they were complete people.

Over time and several visits, I got used to some of the regulars there. One old sour-faced farmer had a terrible habit of frequently saying to anyone around (sometimes with no one around, except for imaginary acquaintances), “Go to hell, go to hell, go to hell!” This had gotten to be an automatic habit for him. But the last time I visited, the staff seemed to have managed to train him to quit that habit. Now, whenever he felt compelled to vocalize that chanting kind of swearing, he would pinch his neck right over his voice box and automatically say nothing. What a clever trick. He seemed pleasant enough in general, as his natural personality lingered into this stage, and he didn’t come across as a hostile and unfriendly person. But having a personality come through at all during his daily interactions with staff and fellow patients was quite a trick in itself.

One time within the memory unit, I got to see an efficient and capable nurse in action. Those staff people were constantly vigilant, but they couldn’t be everywhere at once. One of the old women was sitting in her lunchroom chair loosely tied on with a towel around her waist to keep her safely seated. As I was watching absently and trying to get a piano string to match its partners, she suddenly keeled over and spilled onto the floor. Within a second she was sitting up dizzily and leaning on the wall behind her. She was not hurt at all, and made no unusual vocalizations. But she seemed to accept without question this new situation without trying to move back to the chair. The longish cloth towel was still keeping her partnered with her chair. (I would likely have said to myself, “Hey, this can’t be right...”)

I got the attention of the nearest nurse and pointed out the problem of the woman now sitting on a different level than the others. She gasped but soon decided that it was better than it looked. After thanking me, she hurriedly grabbed a special report form from the nurse’s station and scribbled notes about how the lady had ended up on the floor in spite of the towel around her middle and the back of the chair. The nurse was glancing back and forth from the scene in front of her and the page, maybe sketching a drawing of how the patient looked, post-spill. After that write-up was finished (apparently a requirement every time), the nurse expertly and single-handedly picked the woman up off the floor and plopped her back into her chair. No complaint from either one of them. Just routine life in this place where nothing is predictable. Outsiders should just get used to it.

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Over the course of nearly two years, I regularly tuned two pianos at a remarkably well-organized woman’s shelter in an inner-ring suburb. The women there all needed a safe place to escape to, due to complicated and dangerous situations at home. This building, managed by a county or state social welfare agency, impressed me with the care the managers spent on making the environment peaceful and attractive, with some appealing aesthetic touches and décor. It was like a two-story dorm-style apartment building, with a private room for each woman who needed to take shelter there. The staff was friendly, non-threatening and capable, and they tried hard to make the difficult situation each woman was experiencing turn into the relaxed and safe solace they needed to live in for a while. There were good activities to occupy their time and take their minds off their troubles. There were well-run small group meetings to explore and ease each person’s psychological trauma.

My job there was to add to the important musical component that each resident benefitted from, and as a believer in the value of music therapy, I was happy to make the two pianos sound and play as well as they could. I assume that staff or visiting volunteers came there often to play half-hour performances for whoever wanted to listen. For people who have been through hair-raising, frightening and hugely stressful experiences, just sitting and listening to familiar music can be a great elixir.

A nice grand piano was set up in the middle of a large room with cushy chairs and couches arranged in groupings that allowed families to be together facing each other. No need to think of the piano as the focal point at all; the sweet sound travels to the people's ears just as easily, no matter which way they might be facing. It was like a big, wonderful living room to relish and unwind in. The second piano was an old upright that needed some important repairs (accomplished over two visits) situated in a kind of multi-purpose activities/meeting/dining room. The space was large enough to accommodate many functions, with lots of storage cabinets filled with art supplies and construction paper, and piles of yellow legal pads for serious note-taking. The piano sounded nice in that room and no doubt some of the temporary visitors were able to sit down and play for themselves or a few of their new friends, others who had been through some of the same pressure-filled and trying experiences.

As I worked on either of these pianos, I again became an unintentional witness to people trying to make the best of things, as their inner selves were quietly melting down. The most remarkable situations I involuntarily eaves-dropped on were when the men in these wounded, mostly young women's lives came over to visit. About half of the visitors brought beautiful and sad youngsters with them. There were many tearful reunions. More than once I heard in the distance a high-pitched voice plead "When are you going to come home?" Every man who dropped in (always via appointment arranged with the staff) carried similar expressions on their deeply troubled faces. The common factor was predominantly *contrition*. Yes, they tried hard to be cheerful in this awkward situation, but they all regretted what had brought about this unwanted rift in their most-likely tightly-interwoven lives. The guys all seemed to feel foolish, abjectly sorry, apologetic to the point of kicking themselves repeatedly, longing for things to be right again. I heard from a staff person that some of them had been coming to meetings with the counselors there to try to repair things within their home lives.

During these visits, the omnipresent staff members' behavior was a miracle to behold. They were always hanging well back, observing the rules about non-interference, staying well out of ear-shot. Only once did I notice a tiff where a visiting man regressed into his old, failed patterns of hostility, abuse, and attack using demeaning insults, with raised voices and dangerous body language. No one came to blows, but two staff people (male and female) were on the scene in a flash to intervene and calmly ask the guy to leave. He agreed to depart, while the woman, near-tears, retreated to her room with the sympathetic female staffer.

I can feel a great deal of empathy for the women who needed to be there, and nothing but amazement, gratitude and appreciation for the great professional people who were on the job in a place like this, taking care of these people who needed the help. We are fortunate to live in a society that understands this type of need, and has in place well-conceived methods to assist people in distress. We are all lucky to live in a world that recognizes the importance of this work.

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I visited a mildly upscale home early in my career which overlooked a lake in south Minneapolis. It was a beautiful and well-kept home with an artful eye for appealing decoration. However, there was a cloud of turmoil and regret among the family who lived there that centered around one early-20s guy who seemed quite normal outwardly, but deeply damaged mentally. As I arrived, I talked with him a little when we were alone. He was interested in his piano and getting it to sound good. Then he spontaneously told me about his travels about the world, especially his several weeks of time in western India, by the coast. He had a halting manner of speech, stumbling and stammering occasionally. It was hard to follow his descriptions of his adventures, but he was happy in his own way to revisit them for my benefit. He was lucid enough to function, but he had a very odd demeanor. This was the 1970s when a whole different culture was developing around the ‘counter-culture’ movement and some younger people’s defiant rebellion against conventional behavior.

After he went into the kitchen for a minute, his father, an attentive, sweet middle-aged man appeared from another room. He took me aside while his son was not listening. I could tell he was deeply saddened by some tragic event that had taken place not long ago, during his son’s travels. “You’ll have to cut him a lot of slack; he is no longer normal in his head.” I recognized that the man was very troubled about what had happened, and wished the family could go back to the way things were before his son’s overseas adventuring. “Jeff went way overboard with mind-bending drugs during his time in India. It was way too easy for him to get ahold of all kinds of cheap, weird hallucinogens to experiment with. It really messed him up.” I expressed understanding to this devastated parent and expressed my feeling that this was an unfair turn of events. “We have to live with his new reality now,” he concluded. “But he likes the piano still and we hope it will help somehow.”

Jeff returned with a glass of juice, and again resumed rambling, haltingly, about how things were with his new friends on the other side of the world. His dad walked away shaking his head. I nodded goodbye to him. A teen-aged girl came down the stairs, looked sadly at her brother without a word, and walked around us toward the back door. Her face displayed resignation and hopelessness. This was a burden to bear for everyone in the house now. Before long, Jeff started to become incoherent, and right before my eyes he began a several-minute-long flashback or recurrence to the extreme high he must have repeated many times on his see-the-world excursion. He started to gaze at the ceiling with his eyes half-closed, and a small, mild smile appeared on his face. He was gone to his surroundings, standing there frozen like that. I had to leave him there and walk away toward the grand piano and my task at hand. I felt overwhelmingly sad for this

very damaged young mind, and since then, I have never forgotten that look of distant calm serenity on his face. At what a cost. I have often wondered if therapy and the opportunity for new, normal brain cells to grow has helped him recover.

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There are two other places I have visited that especially deserve to be mentioned here in my chronical of experience. The first was a group home near downtown Minneapolis which cared for mentally ill young adults. All of these people were in their late teens up to age 35 or so, and all seemed to share the same general mindset: bewilderment. None of them could quite fathom where they were and why. This group reminded me of the memory unit at the nursing home I mentioned earlier. The home was situated within a large apartment building where activity rooms and bedrooms were all arranged together in a single interconnected locked unit. It seemed to cover most of the first floor of the four or five-story 1920s brick structure. All of these people had individual needs and problems that varied a great deal. None of them here were violent to themselves or each other, and all were able to take care of themselves to some extent. I gathered that the patients living here were chosen because they shared these characteristics.

But every one of them barely communicated with staff or each other. They all had their own worlds of awareness to reside in. I noticed what seemed to be a typical college guy and a slightly younger casually-dressed woman gravitate to a kind of lounge area (once again furnished with couches and easy chairs) where I was inconspicuously working on an old battered spinet piano, with a maze of repair problems. Neither person noticed me, as far as I could tell. But the most surprising thing to me was the fact that neither one noticed the other person either. Even sitting three feet apart they never looked at each other and never made a sound. They were too removed from reality to react to each other: no contact (eyes or anything else), no acknowledgement that the other was even there. Yes, they were well-suited for the character of the residents who lived there, no anger, hostility, feeling of threat, fears, anxieties, alarm, just passive semi-existence. They paid minor attention to themselves, itches, head-nodding and swaying, occasional attentive to straightening their clothes, dusting off their pant legs while bouncing them in place a little.

Empathy? I felt it strongly as I glanced at each of them. I felt badly for them, and I wished they could open up their realm of awareness just enough to see that someone else much like the other was sitting close at hand. What happens to people that makes this type of isolation become the order of the day? The feeling that these people were once somewhat normal children that led average and routine lives out in the wide world bothered me deeply.

There were watchful staffers present as always, and they talked with each other freely without worry that the residents might be troubled by their chatter or their observations about the people as individuals. None of the staffers' comments were mean spirited, insulting or demeaning, just kind concern, comparing behaviors and actions that each might have done to slightly endanger themselves, others or anything in their surroundings. I wondered if each person being cared for had been medicated in some

small way to get them to be so passive; I supposed that was possible. But each person had become an individual in the minds of the staff, who knew their names and their behavior patterns, and shared concern for them as they all made their unique ways within this safe place. The care-givers discussed openly how their charges were functioning that day—apparently none of the patients were even aware they were being talked about. Once again, I felt awed and humbled in the presence of these devoted pros who wanted things to go as well as possible for all their flock.

Again, I hoped that the presence of music from this piano could do them some good in some subliminal fashion. Music has a way of working itself into a person's mind without impediment, where it can perform some helpful magic internally without meeting much resistance. I wanted that piano to light a beneficial fire inside of each one of them so that they could have their own *awakenings*, just like in that movie from a while ago that described the work of Dr. Oliver Sachs. I liked to imagine the pair on the couch together, once they heard the same music from this piano enter inside them like a wispy spirit of good, turn to each other and smile and feel comfortable together.

The second venue that I wanted to highlight was a much different care unit in a hospital nearby. This setting was devoted to behavioral health for about thirty children and youth who had gone astray in their lives in some manner, often the victims of drugs, alcohol, physical abuse or neglect. I never noticed much actual mental illness or lack of intelligence among these patients, as they interacted just as kids and teens would everywhere. They joked around and played harmless goofy games together, and often seemed bright-spirited. Some had formed good friendships with each other. This branch of the hospital was like a retreat center for them, a place where they could live happily without the stresses of the world and their troubled family lives intervening.

I was told that, sadly, some of them were at risk for suicide and self-harm. The staff had in place stringent rules about bringing into this locked area any items that could be used by individuals to cause harm. I was told to watch my tools carefully and never let any devious sneaker to get close to them. Even an electrical cord was something that never could be left unattended. Luckily, as I worked on those three pianos, one after the other, I was often placed *alone* in the individual rooms where these pianos served their roles. I always had to watch the clock carefully and finish my work before the next scheduled event was to take place in that space. The staff valued my work and always accommodated whatever I needed as much as they could. Patients were always separated from me physically so I could do my work safely without interruption.

I remember one occasion that caused a small disruption to these kids' lives. My last piano tuning of the visit took place in what served as the lunch room (and dining room) for all. I ran a little late -- struggling with some piano strings that would not stay in tune without special attention -- but nonetheless the crowds of hungry youth near the door were kept back so I could get my work done as fast as possible. I was grateful to be treated with such respect. After I opened the door to turn over the room, all eyes in the adjacent big lounge area were upon me. There was a gleeful surge towards the room where their long-awaited dinner would soon be served (I was only ten minutes behind

time, but they still thought it was too long to wait). They charged past me in a happy rush of youthful energy, jostling each other and hunting out places to sit. The food waiting in the kitchen next door was ready to be brought out. On the PA for the whole unit, I heard a woman staffer announce, “The dining room is now open. You can make your way there —WALK! Slow down! Don’t shove!” I stepped aside quickly for my own safety.

These were, in many ways, wonderful children and teens who just needed help coping with whatever emotional dilemmas or internal conflicts that led them in the wrong direction. The people who worked there were experts in mental health and psychology, often with doctorates and years of experience. I knew these youngsters were in excellent hands. Again, I felt empathy and gratitude. I knew then and still feel strongly that people like me with natural balances intact, surrounded by people who think well of me, are the luckiest people in the world. Again, thank you, lucky stars.

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There are many additional memories of sorrow, difficulties and loss that I was witness to over my time as a visitor in people’s lives. Here are a few others that come to mind:

--- At a beautiful and richly appointed home in a far west suburb, I found myself empathizing with a woman who seemed burdened by her husband’s pattern of treatment. The man was a well-established doctor of psychiatry who had an important position in a psychiatry department at a major hospital in the Twin Cities. He was clearly the authority in their household and made it obvious that what she thought about almost everything was not very important. In the few interactions they displayed in my presence, she seemed often intimidated by him, and had a lot of trouble speaking up for herself. I could tell she was unhappy by this imbalance in their marriage but had no way to change the situation. I witnessed a couple of instances of anger and frustration on the part of the doctor when she did not really deserve that treatment. He knew best and she had to accept that, every time. Not a healthy relationship. I was careful to avoid any but the most basic exchanges as I took care of their fine grand piano in its own special room. I am grateful for the marriage I have, which seems to have none of that sort of inequity, as far as I can tell.

--- I worked on a piano for an older woman in the Uptown area of Minneapolis who had just lost her partner a couple of weeks earlier. Apparently playing the piano was very therapeutic for her now. She wanted to show me some photos for an album she had put together for the upcoming memorial service. It turned out that her partner (for about six years, I gathered) had been an actor/performer who had arranged for a number of publicity photos. He seemed to enjoy wearing a series of unusual hats for these shots. He was clearly a colorful, expressive, eccentric guy who must have been a joy to partner with. Charming and individualistic, a fun guy to be close to. The woman’s gaze moved from picture to picture with an adoration that was unmistakable. Tears flowed easily for her in spite of the fact that we had never met before. I told her that he seemed to be a wonderful man, who must have been the love of her life. “You have no idea,” she whispered.

--- I paid a visit to another elderly couple in south Minneapolis (my home neighborhood) where the husband had trouble talking clearly. Right off the bat, his wife explained that he had experienced a stroke a few weeks earlier and that he was still working on his speech skills. She excused herself and went out to work on her lovely garden, which I gather was her pride and joy, and a great place to focus her energy when she had the chance. I can only assume that her attention was often centered on taking care of her husband. The man had no real trouble physically (just a slight lack of smooth coordination) and was quite friendly; he seemed to appreciate the chance to interact with a visitor. He still had his original wit and intelligence, but he was difficult to understand. He apparently did not mind being asked to repeat himself, as needed, sometimes using alternate words. He was an interesting fellow and we were able to exchange ideas about the news of the day, and the condition of the piano. He bemoaned the facts of his condition, telling me that he was diligently working on his piano exercises in hopes of being able to return to his intermediate skill level on the keyboard. His wife came back in occasionally to check on him and to see how things were going. I could tell she was saddened but accepting of her husband's diminished abilities, but her love for him clearly shined through. They already had forty years of marriage behind them.

--- Decades ago, I had become acquainted with a couple whom I had sold a piano to. It was a very-well-preserved old upright with a full sound and a wonderful, rich mahogany finish. For at least five years, the piano had been an important source of enjoyment especially for the husband, who apparently played it nearly every day, in spite of his busy professional career. Over the previous year or so (and a couple of maintenance tunings) I was aware that the man had been diagnosed with inoperable brain cancer, which gradually stole everything from him, including his work, the ability to talk, move around or play the piano at all. A few weeks after his inevitable death, his wife phoned me to ask if I wanted to reclaim the piano, since no one else in the extended family had any interest in it. I set a time to pay her a visit, and after playing on it again for a few minutes, I decided that the condition had not changed at all from the time that I had sold it to them, and I offered to buy it back for the original price. She gratefully accepted, and told me that she loved hearing me play this instrument, which had gone silent since her husband had lost his abilities. My improvising on the keys brought her back to the sound of her husband playing it, sometimes for extended periods. She told me she would always treasure those times when lovely music filled their house.

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