

Making Meaning From Difficult Events

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Alumni of the STFM Behavioral Science Family Systems Educator Fellowship (BFEF; fellows, mentors, and directors) meet for a reunion each year at the STFM Annual Spring Conference. This is an important opportunity to continue to build relationships and connect with colleagues. At this year's reunion dinner, Julie Schirmer, MSW, a former fellowship director, shared the history of the birth of this fellowship that began over a decade ago. We were reminded of the importance of capturing our history so that we can continue to learn from our challenges and successes. The story of the BFEF is also one of how a group of dedicated STFM members worked together to make meaning out of a significant loss.

The BFEF was created out of a crisis. In May of 2009 STFM staff delivered the difficult news to the leadership of the Group on Family* and the Group on Behavioral Science that STFM could no longer fiscally support the Families and Health Conference (aka the "Amelia Island Conference"). This annual conference started in 1981 and was a haven for behavioral science faculty and physician champions. The connections made at the conference had helped to strengthen the collective voice of behavioral science faculty within STFM and their faculty roles within their home institutions.

Over the preceding decade, conference planners had been gently forewarned that the dwindling number of participants was threatening the financial viability of the conference. Travel budgets were diminishing along with participant numbers. Yet, it was easy for some to experience the discontinuation of the conference as a threat to behavioral science faculty. For some, it felt as if this was a sign

of lack of recognition of the value of behavioral faculty within the greater discipline of family medicine.

The Behavioral Science and Family "Group on" leadership worked collaboratively with STFM members and staff to respond to these fears and brainstorm solutions. In many ways, they followed steps similar to a trauma recovery model.¹ Judith Herman, MD, is known for her work on the complex healing process of individuals who experience trauma and described a model of trauma recovery in three distinct stages.

Stage One: Safety, Stabilization, and Education

Stage one of the trauma recovery model focuses on developing a sense of overall functionality and safety.

1. **Create safety, stability, and support.** Deborah Taylor, PhD, Julie Schirmer, MSW, and Amy Romain, MSW (the Behavioral Science Group cochairs), and Victoria Gorski, MD (the Family Group cochair), gathered small groups: regionally, nationally, and via listservs to share perspectives, fears, visions, and grief. Deborah Taylor was on the STFM Board of Directors and did significant work with Stacy Brungardt, STFM CEO, and the STFM board to garner and strengthen support. Frequent communication about this support helped us lean into a growth versus a victim mindset.

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2. **Assess existing strengths and resources.** Four months after receiving the news, a regional meeting of “groups on” chairs and other behavioral science faculty met to identify opportunities, challenges, and strengths, which led to the idea for the fellowship. How could we use STFM support to capture the intimate connecting vibe and community building of the Amelia Island conference within the larger annual STFM conferences of more than 1,000 attendees? How could we strengthen the behavioral health and family voice within the organization? Challenges primarily involved where to find the time, resources, and support for such a heavy lift. Strengths included the detailing wizardry of Laurel Milburg, PhD, who wrote many of the initial organizational manuals and guidebook for the fellowship; the soulful guidance of Victoria Gorski, as first codirector; the fortitude, power, positivity, no-nonsense attitude of Deborah Taylor; the community-building skills and back porch** of Julie Schirmer, where the conception of the BFEF took place; the collaborative spirit and humor of Dennis Butler, PhD, who was the director of the Behavioral Science Forum Conference at the time; and the sage meta-mentoring of Sam Romano, PhD, who helped recruit and guide the first class of small group mentors for the fellowship.
3. **Take action.** In November 2009, Deborah Taylor submitted the proposal from both of the STFM “groups” to the STFM Foundation Board, requesting \$20,000 and organizational support for a 2-year pilot program. The goal was to improve the skills of new behavioral science faculty through a year-long program within the STFM Conference and the Behavioral Science Forum. The proposal and organizational materials were explicit about the need for a diverse group of fellows, mentors, and leadership. It was approved by the STFM Foundation Executive Committee in February 2010.

Stage Two: Processing, Remembering, and Mourning

Stage two of trauma recovery focuses on expression of painful emotions and memories within a judgment-free setting.

1. **Grieve our losses.** We intentionally made space in various forums and

meetings for expression of feelings of loss. A memorial was held during one of the behavioral science group meetings. The path to grief work is individual and complicated.

2. **Make meaning of the past.** As we shared feelings of loss, members also came together reflecting on meaning. We shared memories of times at Amelia Island, of the joys, connections, and creativity. Making meaning out of loss takes time, well beyond an initial grieving phase.

Stage 3: Reconnection and Integration

The third stage focuses on the reinvention of the self and establishment of a hopeful future.

1. **Implement.** After the STFM Board of Directors approved the fellowship proposal, a steering committee was created. Fellows and mentors were recruited so that we were ready to inaugurate our first group of 12 fellows in the spring of 2010. The goals of the fellowship are to help junior faculty who teach behavioral health to:
 - Build a personalized, professional development plan;
 - Better understand medical culture;
 - Integrate behavioral science and family systems core principles into the practice of family medicine; and
 - Grow professionally through strong mentoring relationships with seasoned behavioral science/family systems educators and physicians.
2. The BFEF has graduated 145 graduates over the 13 years since its inception, with a vibrant class of 14 fellows for the current year.
3. **Look to the future.** Through the BFEF fellowship we have fostered the next generation of behavioral science faculty and built a community of mentors and leaders who share their talents and time throughout STFM. As president of STFM, I fully credit the mentorship and connections that I made as part of the inaugural BFEF fellowship class in the success of my professional and leadership journey.
4. **Celebrate success.** We intentionally celebrate our successes and our relationships through annual BFEF graduation ceremonies and reunions during the STFM Annual Spring Conference. The success of the healing journey, moving from a place of loss to one of rebirth, reconnection, and growth can be seen in our broader

community as well. The “groups on” Behavioral Science and on Families and Health merged into the Family and Behavioral Health Collaborative the year after the birth of the BFEF. This collaborative is now one of the three largest within STFM. The Annual Spring Conference is rich with presentations focused on behavioral health and well-being. Behavioral scientists serve in leadership positions throughout our organization. The behavioral science presence and voice is explicitly present and strong within STFM.

We will all continue to experience loss in our lives, in our home institutions, and within STFM (eg, feelings of loss when the *Family Medicine* journal moves to an online-only publication model, and sunseting standing committees or programs), yet through loss we

do have the capacity for healing and growth when talented, dedicated people come together. That is what STFM is about and why we both consider STFM to be our professional home.

Footnotes

* STFM Collaboratives were previously called “Group Ons.”

** Julie Schirmer’s back porch is well known in the behavioral science community. For many years she has held informal gatherings of behavioral science faculty at her home and these back porch meetings have launched many influential projects.

Reference

1. Herman J. *Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse to Political Terror*. Perseus Books; 2015.